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Bib Data Sheet

CONFIRMATION NO. 3939

<b>SERIAL NUMBER</b> 09/939,392	<b>FILING DATE</b> 08/24/2001 <b>RULE</b>	<b>CLASS</b> 704	<b>GROUP ART UNIT</b> 2641 2655	<b>ATTORNEY DOCKET NO.</b> 71416
<b>APPLICANTS</b> James Roberge, Darien, IL; James Wolfer, Berrien Springs, MI; Jeffrey Soble, Highland Park, IL;				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/241,199 10/17/2000 AND A CIP OF 09/584,925 05/31/2000 WHICH IS A CON OF 09/053,304 04/01/1998 PAT 6,154,750				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 09/28/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no		<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 15
Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> 22242				
<b>TITLE</b> Structured speech recognition				
<b>FILING FEE RECEIVED</b> 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	